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| (Re | equestor's Name) | | |
|-------------------------|--------------------|-----------|--|
| (Ac | ldress) | | |
| (Ac | ldress) | | |
| (Ci | ty/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | isiness Entity Nan | ne) | |
| (Document Number) | | | |
| Certified Copies | Certificates | of Status | |
| Special Instructions to | Filing Officer: | | |
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| | -1244 | | |

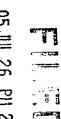
Office Use Only



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SECKLASSEE, STATE TALLAHASSEE, FLORIDA



TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | | | | |
|---|--------------------------------------|--|--|---------------------------------------|
| SUBJECT: | tupuru | Servic | es Inc | |
| (Name of corp | oration - must | include suffix) | | |
| Dear Sir or Madam: | | | | |
| The enclosed "Application by Foreign Corporation" (Certificate of Existence," and check are submitted transact business in Florida. | on for Authoriz ed to register tl | ation to Transact ne above referenc | t Business in Flori ced foreign corpor | da," ation to |
| Please return all correspondence concerning this | matter to the fo | ollowing: | | |
| Kimberly | Sank | 2250 | | |
| Kimberly | ime of Person) | <i>707</i> | | |
| Sahan | Sex | vices | Tnc | |
| (Fi | rm/Company) | | | |
| 146 Chu | ~h | 54 | | |
| | (Address) | | EA. | |
| Wilmin | sto | Ma | 01883 | 0 |
| | State and Zip of | code) | L C | |
| | | | HAS | 25 |
| For further information concerning this matter, p | lease call: | | 7. The second se | ÷ |
| | ~ | | 2 mag | 里汀 |
| (Name of Person) at (C | Aron Code & | رام 58 Daytime Telepho | o O Lo O S | වූ |
| (Name of Ferson) | Alea Code &) | Daytime retepito | inc (Author) | · · · · · · · · · · · · · · · · · · · |
| | | | 1 | |
| STREET ADDRESS: | | MAILING AD | | |
| Registration Section Registration Section Division of Corporations Division of Corporations | | | | |
| 409 E. Gaines St. P.O. Box 6327 | | | | |
| Tallahassee, FL 32399 | | Tallahassee, FI | L 32314 | |
| Enclosed is a check for the following amount: | | | | |
| ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Statu | | Filing Fee & ied Copy | \$87.50 Filing Certificate o | f Status & |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| | E WITH SECTION 607.1503 REIGN CORPORATION TO | | | |
|---|---|--|---|------------------------|
| I. (Enter name of countries," "Co.," | orporation; must include "INC orp," "Inc," "Co," or "Corp.") | Services ORPORATED," "COMPAN | To corporation," | ration |
| (If name unavails | able in Florida, enter alternate | corporate name adopted for t | he purpose of transacting busin | ness in Florida) |
| | Sachuse Hs under the law of which it is inc | corporated) 3. 5(o | - 239(0007 (FEI number, if applicable) |) |
| 4. Sept | of incorporation) | 5. T (Duration: | Year corp. will cease to exist of | or "perpetual") |
| 6 | <u>Uppon</u> (Date first trans | acted business in Florida, if p 7.1501 & 607.1502, F.S., to d | rior to registration) | |
| 7 | · | 46 Church cipal office address) | n St Wilmi | ngton Ma |
| | Same (Curr | ent mailing address) | , , , , , , , , , , , , , , , , , , , | |
| 8. General (Purpose(s) | Remodeling of corporation authorized in I | home state or country to be co | arried out in state of Florida) | TEE EG. |
| | t address of Florida register | <u>~</u> | | JUL 26 |
| Name: Office Address: | 2956 Win | de La | | |
| | S. Daytona (City) | Florid | da 32119 (Zip code) | 2:51 PAIE PORIDA |
| designated in this further agree to co | ent's acceptance: ed as registered agent and tapplication, I hereby acceptomply with the provisions of with and accept the obligations. | ot the appointment as regis f all statutes relative to the | stered agent and agree to ac e proper and complete perfe | ct in this capacity. I |
| 4 | Registered age | ent's signature) | | |
| 11. Attached is a c | certificate of existence duly | authenticated, not more that | an 90 days prior to delivery | of this application to |

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.12. Names and business addresses of officers and/or directors:

| A. DIRECTORS |
|---|
| Chairman: Kimberly Sanborn |
| Address: 146 Church St |
| WilminGton Ma 01887 |
| Vice Chairman: Dan Sanborn |
| Address: 146 Church St |
| Wilmington Ma 01887 |
| Director: Kimberly Sanborn |
| Address: SAML |
| |
| Director: Dan Sanborn |
| Address: A and |
| |
| B. OFFICERS |
| President: Kimberly Sanborn |
| Address: |
| |
| Vice President: Dan Sanborn |
| Address: |
| |
| Secretary: Kimberly Sanborn |
| Address: A and |
| Treasurer: Dan Sanbock |
| Address: Aam |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| |
| (Signature of Director or Officer listed in number 12 of the application) |
| 14. Kimberly SANBORN |
| (Typed or printed name and capacity of person signing application) |



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

William Francis Galvin Secretary of the Commonwealth

JULY 15, 2005

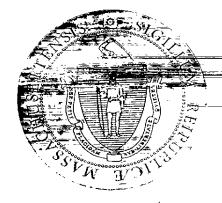
TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

SANBORN SERVICES, INC.

is a domestic corporation organized on **SEPTEMBER 10, 2003**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Processed By: JJM